

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>	W.A		02/01/01
<b>O.I.P.E. CLASSIFIER</b>	L	32-	8/9
<b>FORMALITY REVIEW</b>	T.A	J-804	8/6/01/07/01
<b>RESPONSE FORMALITY REVIEW</b>	AU	917	01-10-01
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**BEST AVAILABLE COPY**  
**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here